MARTIN FROST

24th District, Texas

RANKING MEMBER RULES COMMITTEE

Congress of the United States

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Washington, DC 20515

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PRIVACY ACT RELEASE FORM

THE PRIVACY ACT OF 1974 PROHIB	BITS THE RELEASE OF INFORMAT	ION IN MY FILE
WITHOUT MY APPROVAL. I AUTHO	ORIZE (name of agency)	то
PROVIDE INFORMATION ON MY CI	LAIM/CASE TO CONGRESSMAN MA	ARTIN FROST.
NAME		
ADDRESS		
CITY, STATE, ZIP		
PHONE (HOME)	(WORK)	
SOCIAL SECURITY # OR CLAIM # _		
TYPE OF CLAIM		and the section of th
IF YOU WISH THIS INFORMATION	ГО BE PROVIDED TO PARENT, CH	ILD, ATTORNEY, OR
OTHER INTERESTED PART, PLEASE	E IN CLUDE BELOW:	
I AUTHORIZE	TO RECEIVE IN	FORMATION FROM
CONGRESSMAN FROST RELATIVE	ГО MY CLAIM/CASE.	
BRIEFLY DESCRIBE YOUR DIFFICULTY	, HOW YOU H AVE TRIED TO RESOL	VE IT YOURSELF, AND
THE OUTCOME YOU ARE SEEKING. (PR	OVIDE RELEVANT SUPPORTING DOCUME	NTS.)
DATE	SIGNATURE	
DAIL	SIGNATURE	